

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL043015	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 10/16/2015
NAME OF PROVIDER OR SUPPLIER OAK HILL LIVING CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 9767 NC 210-N ANGIER, NC 27501		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments Report of a Complaint Investigation by Billy S. Bryant and Frank Strickland conducted on 10/16/2015 Records indicate this facility was first licensed on 12/17/1997. The facility is currently licensed for 122. Therefore the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1996 (1997 Revision) Edition of the North Carolina Building Code(s), Institutional Occupancy and the 1996 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure.	C 000	Please See attached Corrective Plan of action it was faxed 10/29/15	
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. The facility has not maintained the walls and floors clean and in good repair as evidenced by damaged furnishings (doors), corridor walls that are scraped and scarred and a floor area that requires cleaning. Failure to maintain the facility in the best possible condition effect the overall environment for all occupants of the facility. Findings on 10/16/2015 repairs are required but	C 164		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE SIGNATURE

TITLE

(X6) DATE

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C 184	Continued From page 1 not limited to the specific locations cited below: a. Rooms 202 & 205 - The finish layer of wood is delaminating from the door. b. 200 Hall Public Bath - The door wood facing is scratched and scarred. c. Front Parlor - The bottom of the door is scratched and scarred. d. Front Nurse 's Station Med Room - The door is scratched, scarred and the finish layer of facing wood is delaminating from the door. e. Marketing Office - The weather stripping for the doors is damaged. f. Some areas of the corridor hallstand base are scratched and scarred requiring repair. g. 200 Hall Public Bath - The floor requires cleaning.	C 184			
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation there is failure to	C 189			

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C 189	<p>Continued From page 2</p> <p>maintain electrical emergency/safety related equipment in a safe operating condition. Failure to maintain electrical emergency safety equipment in safe and operable condition could effect occupants of the facility if the equipment did not function when and as required in the event of an emergency evacuation.</p> <p>Finding on 10/16/2015:</p> <p>a. The wall mounted emergency light adjacent to the parlor did not operate when tested.</p> <p>2. Based on observation there is failure to maintain electrical equipment in a safe operating condition. Failure to maintain electrical equipment in safe condition could effect an occupant of the facility attempting to use the electrical device or equipment.</p> <p>Finding on 10/16/2015:</p> <p>a. Kitchen - There is an energized open socket in a light fixture.</p> <p>b. Kitchen - There are stored items blocking access to the electrical panels.</p> <p>3. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition as evidenced by doors that do not completely close and latch. Doors are required to completely close and latch in the event of a fire in order to resist the passage of smoke or the spread of fire. All the occupants in the facility could be effected if doors do not latch and remain closed so as to limit the spread of smoke or fire to the area of origin.</p> <p>Findings on 10/16/2015:</p> <p>a. Room #321 - Does not completely close and latch.</p>	C 189			

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C 189	Continued From page 3 b. 100 & 200 Halls - When doors from the resident rooms to the corridor are fully opened the lever handles on the door hardware catch and interlock on the lever handles on the door hardware for the resident bathrooms and in some cases interfering with closing the door to the corridor. 3. Based on observation there is failure to install and maintain plumbing equipment in a safe condition. Failure to maintain plumbing in safe condition could effect occupants of the facility if because of unsafe conditions the domestic water supply became contaminated. Findings on 10/16/2015: a. Kitchen - There is not the required no 2 " minimum gap between the ice machine drain and the floor drain.	C 189		



OAK HILL

LIVING CENTER

P.O. Box 759 • 9767 NC 210 North • Angier, North Carolina 27501
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Completions of Violations and Plan of Action

1. Emergency light out at 300 hall parlor. 10/21/15- Light was replaced.
2. Room 321- Door dragging on threshold. 10/19/15- Filed door threshold and tightened up door hinges.
3. Light in Kitchen area incomplete. 10/19/15-Replaced bulb and globe.
4. Ice maker drain needs to be 2" above floor drain. 10/19/15- Blocked up pipes 2 inches above drain.
5. 200 Hall needs kick-plates. 10/19/15-10/20/15- Installed kick-plates on bottom of doors on the 100 and 200 hall bathroom doors.
6. Door to Med-room (100,200 hall) needs to have scarring and chips covered up. 10/19/15- installed 2 kick plates in the areas of scarring and chipping.
7. Office fire doors need the seal strips replaced. 10/22/15- ordered the seal strips from "Commercial openings" will install when it arrives.
8. Need door stops on 100 and 200 hall. 10/23/15- ordered the door stops from "Commercial openings" will install when they arrive.
9. 205- Door Latch cover. As of yet we have not found a cover that will fit our door and knob configuration.